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Total Pages (Incl. cover):

TO:

Mail Stop AF12

FR:

Charles Cohen630-527-4660

DATE:

6/11/07

Serial

RE: No10/529,659

COMMENTS:

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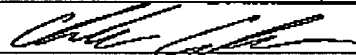
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FEE TRANSMITTAL For FY 2005		Complete if Known	
		Application Number	10/529,659
		Filing Date	October 21, 2005
		First Named Inventor	Tomita et al.
		Examiner Name	Travis Sloan Chambers
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Art Unit	2833
TOTAL AMOUNT OF PAYMENT \$ 320.00		Attorney Docket No.	A3-072 US

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): <input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>50-1873</u> Deposit Account Name: <u>Molex Incorporated</u> For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee <input checked="" type="checkbox"/> Charge any addtl. fee(s) or underpayments under 37 CFR 1.16 and 1.17 and credit any overpayments.	

FEE CALCULATION					
1. Basic Filing, Search and Examination Fees					
	Filing Fees	Search Fees	Examination Fees		Fees Paid (\$)
Utility	\$300	\$500	\$200		\$
Design	\$200	\$100	\$130		\$
Plant	\$200	\$300	\$160		\$
Reissue	\$300	\$500	\$600		\$
Provisional	\$200	\$0	\$0		\$
2. Excess Claim Fees					
Each claim over 20 (including Reissues)					
<u>Total Claims</u>		<u>Extra Claims</u>		<u>Fee (\$)</u>	
8	-20 or HP=	0	x	\$50	= \$0.00
Each independent claim over 3 (including Reissues)					
<u>Indep. Claims</u>		<u>Extra Claims</u>		<u>Fee (\$)</u>	
4	-3 of HP=	1	x	\$200	= \$200.00
Multiple dependent claims				\$360	\$
3. Application Size Fee (over 100 sheets)					
<u>Total sheets</u>	<u>Extra sheets</u>	<u>Number of each addtl 50 (round up to whole #)</u>		<u>Fee (\$)</u>	
-100 =	/50 =		x	\$250	= \$
4. Petition for Extension of Time Fees					
One Month (37 CFR 1.17(a)(1))					\$120.00
5. Other fee(s)					
					\$
					\$
TOTAL FEES					\$320.00

Name (Print/Type)	Charles S. Cohen	Registration No. 32,210	Telephone (630) 527-4660
Signature			Date June 11, 2007

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PATENT
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE APPLICATION OF: Tomita et al.

APPLICATION NO.: 10/529,659

FILED: October 21, 2005

FOR: MEMORY CARD CONNECTOR

EXAMINER: Travis Sloan Chambers

ART UNIT: 2833

ATTORNEY DOCKET NO.: A3-072 US

AMENDMENT B


Mail Stop AF
Commissioner for Patents
Alexandria, Virginia 22313-1450

Sir:

Responsive to the Final Office Action mailed February 9, 2007, finally rejecting the above-identified patent application, kindly amend same as follows:

Amendments to the Claims begin on page 2.

Remarks/Arguments begin on page 6.

CERTIFICATE OF MAILING OR TRANSMISSION UNDER 37 CFR 1.8			
I hereby certify that this amendment is, on the date indicated below, being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or being facsimile transmitted to the U.S. Patent and Trademark Office, Facsimile No. 571-273-8300.			
Name (Print/Type)	Charles Cohen		
Signature		Date	June 11, 2007

06/12/2007 TL0111 00000057 501873 10529659

01 FC:1201 200.00 DA
02 FC:1251 120.00 DA